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023545 7590 03/04/2004

KATHLEEN M HARLESTON
THE HARLESTON LAW FIRM
909 TALL PINE ROAD
MT PLEASANT, SC 29464



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KATHLEEN M. HARLESTON (Depositor's name)
Kathleen M. Harleston (Signature)
June 1, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/620,885	07/16/2003	Carl Kenneth Tedder	0065	8113

TITLE OF INVENTION: STACKABLE COOLER SHELVEING SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	06/04/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ALI, MOHAMMAD M	3744	062-457700

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 KATHLEEN M. HARLESTON
2 HARLESTON LAW FIRM LLC
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(A) NAME OF ASSIGNEE

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(Authorized Signature)

(Date)

Kathleen M. Harleston June 1, 2004

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01 FC:2501
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PTO/SB/21 (02-04)
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/620,885	
	Filing Date	July 16, 2003	
	First Named Inventor	Carl Kenneth Tedder	
	Art Unit	3744	
	Examiner Name	Mohammad M Ali	
Total Number of Pages in This Submission	2	Attorney Docket Number	0065

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Kathleen M. Harleston	
Signature	<i>Kathleen M. Harleston</i>	
Date	June 1, 2004	

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Typed or printed name	Kathleen M. Harleston		
Signature	<i>Kathleen M. Harleston</i>	Date	June 1, 2004

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